

D.C. Office of Personnel
District of Columbia Employees' Health Benefits Program (DCEHB)
Effective January 1, 2006

Plan Name	Enrollment Code	Your Share of Premium Bi-weekly	The District's Share of Premium Bi-weekly	Member Services Contact Number	Insurance Group Code
Cigna (PPO)	CN1 (self only)	\$ 49.93	\$ 149.81	1-800-251-0669 (medical)	25724-A
	CN2 (family option)	\$129.80	\$ 389.38	1-800-367-1037 (dental)	
Aetna (HMO)	HM1 (self only)	\$ 31.18	\$ 93.56	1-888-238-6258	172614
	HM2 (family option)	\$ 81.08	\$ 243.25		
Kaiser Permanente (HMO)	KP1 (self only)	\$ 32.28	\$ 96.84	301-468-6000	13703-0
	KP2 (family option)	\$ 83.82	\$ 251.46		
MD IPA (HMO)	MD1 (self only)	\$ 31.62	\$ 94.86	1-800-251-1712	M14517
	MD2 (family option)	\$ 82.02	\$ 246.07		

Please note: The District of Columbia government contributes 75 percent of your total premium cost. Your share – 25 percent is deducted from your paycheck on a pre-tax basis, which increases your take home pay.

10/25/2005

